



Attorney Docket No. 040302-0385
Application No. 10/790,529

JPW/RCE
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Takashi ODA *et al.*
Title: **RESIN COMPOSITION, FILLER, AND
METHOD OF PRODUCING RESIN
COMPOSITION**
Application No.: 10/790,529
Application Filing Date: 3/2/2004
Examiner: Marc A. Patterson
Art Unit: 1794
Confirmation Number: 2757

REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. §141, or the commencement of a civil action under 35 U.S.C. §145 or §146 (unless the appeal or civil action is terminated).

1. Submission required under 37 C.F.R. §1.114: (check items that apply)

a. Previously submitted:

10/20/2008 SZEWDIE1 00000065 10790529

01 FC:1801	810.00 OP
02 FC:1201	220.00 OP
03 FC:1202	364.00 OP
04 FC:1253	1110.00 OP

- ☐ Please enter and consider the amendment and/or reply previously filed on _____.
- ☐ Please consider the Affidavit(s)/Declaration(s) previously filed on __ but not considered.
- ☐ Please consider the arguments in the Appeal Brief or Reply previously filed on ____.
- ☐ Other ____.
- b. Enclosed are:
- ☒ Amendment/Reply.
- ☐ Affidavit(s)/Declaration(s).
- ☐ Information Disclosure Statement.
- ☐ Form PTO/SB/08 with copies of ____ listed reference(s).
- ☐ Other .

Miscellaneous:

- ☐ Suspension of action of the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of __ months.

The filing fee is calculated below:

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Fee Totals
RCE Fee 1.17(e):				\$810.00	= \$810.00
Total Claims:	56	-	49 = 7	x \$52.00	= \$364.00
Independents	6	-	5 = 1	x \$220.00	= \$220.00
First presentation of any Multiple Dependent Claims:				+ \$390.00	= \$0.00

CLAIMS FEE TOTAL: = \$1394.00

[X] Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the
total number of months checked below:

[]	Extension for response filed within the first month:	\$130.00	0	\$0.00
[]	Extension for response filed within the second month:	\$490.00		\$0.00
[X]	Extension for response filed within the third month:	\$1,110.00		\$1,110.00
[]	Extension for response filed within the fourth month:	\$1,730.00		\$0.00
[]	Extension for response filed within the fifth month:	\$2,350.00		\$0.00
EXTENSION FEE SUBTOTAL:				\$1,110.00
EXTENSION FEE ALREADY PAID: -				\$0.00
EXTENSION FEE TOTAL				\$1,110.00
CLAIMS AND EXTENSION FEE TOTAL:				\$2,504.00
[]	Small Entity Fees Apply (subtract ½ of above):			\$0.00
[]	Suspension of action requested under 37 C.F.R. § 1.103(c)			\$0.00
TOTAL FEE:				\$2,504.00

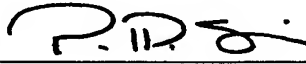
A credit card payment form in the amount of \$2,504.00 to cover the filing fee is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 10/17/08

By 

FOLEY & LARDNER LLP
Customer Number: 22428
Telephone: (202) 672-5540
Facsimile: (202) 672-5399

Paul D. Strain
Attorney for Applicant
Registration No. 47,369